



ARIZONA HEALTH CARE
COST CONTAINMENT SYSTEM
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2003 Rate Codes - Behavioral Health

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PROC	DESCRIPTION	RATE2003	EFFDATE
90801	PSYCHIATRIC DIAGNOSTIC INTERVIEW EXAMINATION	\$148.29	1-Apr-01
90802	INTERACTIVE PSYCHIATRIC DIAGNOSTIC INTERVIEW EXAMINATION USING PLAY EQUIPMENT, P	\$154.10	1-Apr-01
90804	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$65.99	1-Apr-01
90805	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$73.93	1-Apr-01
90806	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$99.72	1-Apr-01
90807	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$106.99	1-Apr-01
90808	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$150.21	1-Apr-01
90809	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$157.41	1-Apr-01
90810	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$73.15	1-Apr-01
90811	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$81.48	1-Apr-01
90812	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$106.21	1-Apr-01
90813	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$113.41	1-Apr-01
90814	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$152.90	1-Apr-01
90815	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$159.36	1-Apr-01
90816	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$68.63	1-Apr-01
90817	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$76.20	1-Apr-01
90818	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$101.98	1-Apr-01
90819	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$108.88	1-Apr-01
90821	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$152.78	1-Apr-01
90822	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR SUPPORTIVE	\$158.94	1-Apr-01



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90823	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$78.03	1-Apr-01
90824	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$85.23	1-Apr-01
90826	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$109.53	1-Apr-01
90827	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$116.79	1-Apr-01
90828	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$155.17	1-Apr-01
90829	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES, L	\$162.37	1-Apr-01
90845	PSYCHOANALYSIS	\$93.70	1-Apr-01
90846	Family psytx w/o patient	\$98.21	1-Apr-01
90847	FAMILY PSYCHOTHERAPY (CONJOINT PSYCHOTHERAPY) (WITH PATIENT PRESENT)	\$116.46	1-Apr-01
90849	MULTIPLE-FAMILY GROUP PSYCHOTHERAPY	\$35.93	1-Apr-01
90853	GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIPLE-FAMILY GROUP)	\$35.19	1-Apr-01
90857	INTERACTIVE GROUP PSYCHOTHERAPY	\$37.15	1-Apr-01
90862	PHARMACOLOGIC MANAGEMENT, INCLUDING PRESCRIPTION, USE, AND REVIEW OF MEDICATION	\$53.05	1-Apr-01
90865	NARCOSYNTHESIS FOR PSYCHIATRIC DIAGNOSTIC AND THERAPEUTIC PURPOSES (EG, SODIUM A	\$161.81	1-Apr-01
90870	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSARY MONITORING); SINGLE SEIZURE	\$99.74	1-Apr-01
90871	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSARY MONITORING); MULTIPLE SEIZURES, PE	\$143.38	1-Apr-01
90875	INDIVIDUAL PSYCHOPHYSIOLOGICAL THERAPY INCORPORATING BIOFEEDBACK TRAINING BY ANY	\$47.86	1-Jun-00
90876	INDIV PSYC THERAPY BIOFEEDBACK TRAINING BY ANY MODALITY 45-50 MIN	\$74.51	1-Jun-00
90880	Hypnotherapy	\$116.82	1-Apr-01
90882	ENVIRONMENTAL INTERVENTION FOR MEDICAL MANAGEMENT PURPOSES ON A PSYCHIATRIC PATI	\$150.00	1-Jul-00
90885	PSYCHIATRIC EVALUATION OF HOSPITAL RECORDS, OTHER PSYCHIATRIC REPORTS, PSYCHOMET	\$34.00	1-Jul-00



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90887	INTERPRETATION OR EXPLANATION OF RESULTS OF PSYCHIATRIC, OTHER MEDICAL EXAMINATI	\$64.06	1-Jun-00
90889	PREPARATION OF REPORT OF PATIENT'S PSYCHIATRIC STATUS, HISTORY, TREATMENT, OR PR	\$64.54	1-Jun-00
90899	Psychiatric service/therapy	BR	1-Oct-82
96100	PSYCHOLOGICAL TESTING (INCLUDES PSYCHODIAGNOSTIC ASSESSMENT OF PERSONALITY, PSYC	\$72.62	1-Apr-01
96105	ASSESSMENT OF APHASIA (INCLUDES ASSESSMENT OF EXPRESSIVE AND RECEPTIVE SPEECH AN	\$72.62	1-Apr-01
96110	DEVELOPMENTAL TESTING; LIMITED (EG, DEVELOPMENTAL SCREENING TEST II, EARLY LANGU	\$71.00	1-Jul-00
96111	DEVELOPMENTAL TESTING; EXTENDED (INCLUDES ASSESSMENT OF MOTOR, LANGUAGE, SOCIAL,	\$72.62	1-Apr-01
96115	NEUROBEHAVIORIAL STATUS EXAM (CLINICAL ASSESSMENT OF THINKING, REASONING AND JUDG	\$72.62	1-Apr-01
96117	NEUROPSYCHOLOGICAL TESTING BATTERY (EG, HALSTEAD-REITAN, LURIA, WAIS-R) WITH INT	\$72.62	1-Apr-01
G0110	NETT PULM-REHAB; EDUCATION/SKILLS TRAINING, INDIVIDUAL	\$59.05	1-Apr-01
G0111	NETT PULM-REHAB; EDUCATION/SKILLS TRAINING, GROUP	\$21.15	1-Apr-01
G0112	NETT PULM-REHAB; NUTRITIONAL GUIDANCE, INITIAL	\$117.59	1-Apr-01
G0113	NETT PULM-REHAB; NUTRITIONAL GUIDANCE, SUBSEQUENT	\$89.61	1-Apr-01
G0114	NETT PULM-REHAB; PSYCHOSOCIAL CONSULTATION	\$64.11	1-Apr-01
G0115	NETT PULM-REHAB; PSYCHOLOGICAL TESTING	\$69.78	1-Apr-01
G0116	NETT PULM-REHAB; PSYCHOSOCIAL COUNSELLING	\$81.27	1-Apr-01
G0270	MEDICAL NUTRITION THERAPY; REASSESSMENT AND SUBSEQUENT INTERVENTION(S)	\$17.32	1-Apr-03
G0271	MEDICAL NUTRITION THERAPY, REASSESSMENT AND SUBSEQUENT INTERVENTION(S)	\$6.88	1-Apr-03
W2072	LEVEL 1 PSYCHIATRIC HEALTH FACILITY	BR	1-Oct-95
W2073	LEVEL 1 RESIDENTIAL DETOXIFICATION FACILITY	BR	1-Oct-95
W2100	NURSING SERVICES	\$17.00	1-Jul-01



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W2101	OPIOID AGONIST ADMINISTRATION-OFFICE	\$11.00	1-Oct-98
W2102	OPIOID AGONIST ADMINISTRATION-TAKE HOME	\$2.50	1-Oct-98
W2151	HOME BASED INDIVIDUAL THERAPY/COUNSELING (1MBR TEAM, 15 MIN)	\$20.00	1-Jul-01
W2152	FAMILY COUNSELING, OUT-OF-OFFICE	\$23.00	1-Jul-01
W2205	TREATMENT DAY - RESIDENTIAL TREATMENT FACILITY AGE LT 5 YRS	\$135.00	1-Jun-97
W2206	SERVICE DAY/AGE 0-20	BR	1-Oct-98
W2300	OFFICE/CLINIC INDIVIDUAL THERAPY/COUNSELING (OTHER MENTAL HLTH PRCTNR-15 MIN)	\$18.00	1-Jul-01
W2350	OFFICE/CLINIC FAMILY THERAPY/COUNSELING (OTHER MENTAL HEALTHPRACTIONER-15 MIN.)	\$18.50	1-Jul-01
W2351	OFFICE/CLINIC GRP THERAPY/COUNSELING (OTHER MENTAL HEALTH PRACTIONER-15 MIN.)	\$6.00	1-Jul-02
W2401	NURSING FAC OR RESDNTL CARE FAC BASED INDVDL THRPY/CNSLING PROV BY A PSYCHOLOGI	\$22.00	1-Oct-92
W2403	NURSING FAC OR RESDNTL CARE FAC BASED GRP THRPY/CNSLING (PROVIDED BY A PSYCHOLOG	\$5.00	1-Oct-92
W2404	HOME RESPIRATORY THERAPY NON-MEDICARE CERTIFIED HHA	\$38.14	1-Jan-94
W2405	HOME RESPIRATORY THERAPY MEDICARE CERTIFIED HOME HLTH AGENCY	\$45.67	1-Jan-94
W2406	HOME RESPIRATORY THERAPY, RESPIRATORY THERAPIST (IND)	\$24.29	1-Jan-94
W4001	ASSESSMENT GENERAL	\$29.50	3-Oct-01
W4002	ASSESSMENT REHABILITATIVE EMPLOYMENT SUPPORT	\$33.50	3-Oct-01
W4003	SCREENING	\$9.00	3-Oct-01
W4005	ASSESSMENT COMPREHENSIVE	\$42.00	3-Oct-01
W4006	LIVING SKILLS TRAINING-INDIVIDUAL	\$12.50	3-Oct-01
W4015	LIVING SKILLS TRAINING GROUP (PER PERSON)	\$4.00	3-Oct-01
W4016	LIVING SKILLS TRAINING 3>HOURS EXTENDED	\$14.50	1-Jan-02
W4020	HEALTH PROMOTION (PER PERSON)	\$4.50	3-Oct-01
W4030	PRE-JOB TRAINING EDUCATION AND DEVELOPMENT	\$7.50	3-Oct-01
W4031	JOB COACHING AND EMPLOYMENT SUPPORT	\$6.00	3-Oct-01
W4040	CASE MANAGEMENT - BEH HEALTH PROFESSIONAL - OFFICE	\$20.00	3-Oct-01
W4041	CASE MANAGEMENT-BEH HEALTH PROFESSIONAL - OUT-OF-OFFICE	\$23.00	3-Oct-01
W4042	CASE MANAGEMENT - BEH HEALTH TECHNICIAN- OFFICE	\$7.50	3-Oct-01



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W4043	CASE MANAGEMENT - OUT-OF-OFFICE	\$10.50	3-Oct-01
W4044	PERSONAL ASSISTANCE	\$10.00	3-Oct-01
W4045	PERSONAL ASSISTANCE-EXTENDED	\$14.50	3-Oct-01
W4046	FAMILY SUPPORT	\$18.50	3-Oct-01
W4047	PEER SUPPORT	\$10.00	3-Oct-01
W4048	PEER SUPPORT-EXTENDED	\$14.50	3-Oct-01
W4049	PEER SUPPORT GROUP (PER PERSON)	\$3.00	3-Oct-01
W4050	THERAPEUTIC FOSTER CARE	\$56.00	3-Oct-01
W4051	LEVEL II BEHAVIORAL HEALTH RESIDENTIAL	\$163.00	1-Jul-02
W4052	LEVEL III BEHAVIORAL HEALTH RESIDENTIAL	BR	3-Oct-01
W4060	CRISIS INTERVENTION-URGENT(UP TO 5 HOURS)	\$26.50	3-Oct-01
W4061	CRISIS INTERVENTION-URGENT(5 THROUGH 23 HOURS)	\$294.50	3-Oct-01
W4062	CRISIS INTERVENTION MOBIL 1 PERSON	\$54.00	3-Oct-01
W4063	CRISIS INTERVENTION MOBIL TEAM 2 PERSON	\$69.00	3-Oct-01
W4070	BEHAVIORAL HEALTH DAY PROGRAM-SUPERVISED	\$11.00	3-Oct-01
W4071	BEHAVIORAL HEALTH DAY PROGRAM-SUPERVISED(MIN OF 3 HRS < THAN6 HOURS)	\$30.50	3-Oct-01
W4072	BEHAVIORAL HEALTH DAY PROGRAM SUPERVISED (6 HOURS OR MORE)	\$65.50	3-Oct-01
W4073	BEHAVIORAL HEALTH DAY PROGRAM-THERAPEUTIC	\$17.00	3-Oct-01
W4074	BEHAVIORAL HEALTH DAY PROGRAM-THERAPEUTIC (MIN 3 HRS AND LESS THAN 6 HRS)	\$54.50	3-Oct-01
W4075	BEHAVIORAL HEALTH DAY PROGRAM-THERAPEUTIC (6 HOURS OR MORE)	\$103.00	30-Oct-01
W4076	BEHAVIORAL HEALTH DAY PROGRAM-THERAPEUTIC	BR	3-Oct-01
W4077	BEHAVIORAL HEALTH DAY PROGRAM-THERAPEUTIC (MIN 3 HRS LESS THAN 6)	BR	3-Oct-01
W4078	BEHAVIORAL HEALTH DAY PROGRAM-THERAPEUTIC (6 HOURS OR MORE)	BR	3-Oct-01
W4079	BEHAVIORAL HEALTH DAY PROGRAM-MEDICAL	\$22.00	3-Oct-01
W4080	BEHAVIORAL HEALTH DAY PROGRAM-MEDICAL (MIN 3 HRS < 6 HRS	\$61.50	3-Oct-01
W4081	BEHAVIORAL HEALTH DAY PROGRAM-MEDICAL (6 HOURS OR MORE)	\$131.50	3-Oct-01
W4082	BEHAVIORAL HEALTH DAY PROGRAM-MEDICAL	BR	3-Oct-01
W4083	BEHAVIORAL HEALTH DAY PROGRAM-MEDICAL (MIN 3 HRS LESS THAN 6)	BR	3-Oct-01



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W4084	BEHAVIORAL HEALTH DAY PROGRAM-MEDICAL (6 HOURS OR MORE)	BR	3-Oct-01
Z3465	LARK PER DIEM	\$124.27	26-Jun-89